REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

FEB 2 | 27 PM '99

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
ROBERT P. MORGAN, TREASURER
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ☐ Check if different than previously reported
14600 TRINITY BLVD. SUITE 500

CITY, STATE and ZIP CODE
FORT WORTH, TX. 76155-2512

2. FEC IDENTIFICATION NUMBER
C-00267849

3. [X] This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
[X] January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____

☐ 30-Day Post-Election Report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☐ YES [X] NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 11/24/98 through 12/31/98		
6. (a) Cash on Hand January 1, 19 98		$ 140,910.72
(b) Cash on Hand at Beginning of Reporting Period	$ 102,434.54	
(c) Total Receipts (from Line 19)	$ 8,967.47	$ 124,064.29
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 111,402.01	$ 264,975.01
7. Total Disbursements (from Line 30)	$ .00	$ 153,573.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 111,402.01	$ 111,402.01
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	$ .00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	$ .00	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
ROBERT P. MORGAN

Signature of Treasurer

Date 1-27-99

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3X
(revised 8/98)

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DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

REPORT COVERING PERIOD FROM 11/24/98 TO: 12/31/98

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:	1,303.00	7,338.00	11(a)(i)
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	7,022.00	111,242.49	11(a)(ii)
ii. Unitemized	8,325.00	118,580.49	11(a)(iii)
iii. Total ... (add i and ii) ➤			11(b)
b. Political Party Committees			11(c)
c. Other Political Committees (such as PACs)	8,325.00	118,580.49	11(d)
d. Total Contributions ... (add a iii, b and c) ➤			12
12. Transfers From Affiliated/Other Party Committees			13
13. All Loans Received			14
14. Loan Repayments Received			15
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			16
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	642.47	5,483.80	17
17. Other Federal Receipts (Dividends, Interest, etc.)			18
18. Transfers from Nonfederal Account for Joint Activity	8,967.47	124,064.29	19
19. Total Receipts ... (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	8,967.47	124,064.29	20
20. Total Federal Receipts ... (subtract line 18 from line 19) ➤			
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(i)
i. Federal Share			21(a)(ii)
ii. Non-Federal Share			21(b)
b. Other Federal Operating Expenditures			21(c)
c. Total Operating Expenditures ... (add a i, a ii, and b) ➤			22
22. Transfers to Affiliated/Other Party Committees	.00	147,500.00	23
23. Contributions to Federal Candidates/Committees and Other Political Committees			24
24. Independent Expenditures (use Schedule E)			25
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			26
26. Loan Repayments Made			27
27. Loans Made			
28. Refunds of Contributions To:			28(a)
a. Individuals/Persons Other Than Political Committees			28(b)
b. Political Party Committees			28(c)
c. Other Political Committees (such as PACs)			28(d)
d. Total Contribution Refunds ... (add a, b and c) ➤	.00	6,073.00	29
29. Other Disbursements	.00	153,573.00	30
30. Total Disbursements ... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	.00	153,573.00	31
31. Total Federal Disbursements ... (subtract line 21 a ii from line 30) ➤			
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	8,325.00	118,580.49	32
33. Total Contribution Refunds (from line 28d)	.00	.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	8,325.00	118,580.49	34
35. Total Federal Operating Expenditures ... (add 21 a i and 21 b) ➤	.00	.00	35
36. Offsets to Operating Expenditures (from line 15)	.00	.00	36
37. Net Operating Expenditures ... (subtract line 36 from 35) ➤	.00	.00	37

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE OF

FOR LINE NUMBER 11 A i

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NAME OF COMMITTEE (in Full)

Allied Pilots Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Abbott, Scott 420 W Grand Ave Apt 5B Chicago, IL 60610-5935 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 247.50	Payroll Deduction	138.00 (19 per month)
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Alderson, Stephen PO Box 401 Litchfield, IL 62056-0401 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 300.00	Payroll Deduction	25.00 (25 per month)
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Aldrich, David 221 Chasse Cir St Charles, IL 60174-5723 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 240.00	Payroll Deduction	20.00 (20 per month)
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Arndt, Richard PO Box 333 Clinton, CT 06413-0333 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 300.00	Payroll Deduction	25.00 (25 per month)
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Bowen, Michael 341 N Homestead Dr Landisville, PA 17538-1377 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 600.00	Payroll Deduction	50.00 (50 per month)
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Clayton, Philip 1415 S Barton St # 206 Arlington, VA 22204-4842 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 240.00	Payroll Deduction	20.00 (20 per month)
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Considine, Martin 1295 Wood Row Way Wellington, FL 33414-9023 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 300.00	Payroll Deduction	25.00 (25 per month)

SUBTOTAL of Receipts This Page (optional) 303.00

TOTAL This Period (last page this line number only) .....

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)

Allied Pilots Association Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Drummond, David 1 Crane Ct Manalapan, NJ 07726-3628 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Occupation: Airline Pilot Aggregate Year-to-Date > $ 900.00	Payroll Deduction	75.00 (75 per month)
B. Edwards, Joel W303N1780 Maple Ave Pewaukee, WI 53072-4753 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Occupation: Airline Pilot Aggregate Year-to-Date > $ 300.00	Payroll Deduction	25.00 (25 per month)
C. Ehrlich, John 140 Chestnut Dr Wayne, NJ 07470-5802 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Occupation: Airline Pilot Aggregate Year-to-Date > $ 300.00	Payroll Deduction	25.00 (25 per month)
D. Estes, Richard 545 Clew Ct Azle, TX 76020-4941 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Occupation: Airline Pilot Aggregate Year-to-Date > $ 240.00	Payroll Deduction	20.00 (20 per month)
E. Fullerton, Robert 1214 SE 12th Ter Deerfield Beach, FL 33441-7132 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Occupation: Airline Pilot Aggregate Year-to-Date > $ 300.00	Payroll Deduction	25.00 (25 per month)
F. Gore, William 938 E Wimbledon Dr Fresno, CA 93720-1355 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Occupation: Airline Pilot Aggregate Year-to-Date > $ 240.00	Payroll Deduction	20.00 (20 per month)
G. Gray, William PO Box 2234 Somerset, NJ 08875-2234 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Occupation: Airline Pilot Aggregate Year-to-Date > $ 300.00	Payroll Deduction	25.00 (25 per month)

SUBTOTAL of Receipts This Page (optional) 215.00

TOTAL This Period (last page this line number only) .....

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NAME OF COMMITTEE (In Full)

Allied Pilots Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Grundeland, Harald 22 Bloomer Dr Burlington, NJ 08016-3669 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 1100.00	Payroll Deduction	0.00 (100 per month)
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Hahn, Michael 1880 Jackson St Ste 8449 Oshkosh, WI 54901-2204 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 550.00	Payroll Deduction	50.00 (50 per month)
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Hughes, Joseph 3109 San Clara Dr Apt A Delray Beach, FL 33445-5430 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 200.00	Payroll Deduction	20.00 (20 per month)
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Hugulay Jr, Robert 47725 Allegheny Cir Sterling, VA 20165-4706 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 300.00	Payroll Deduction	25.00 (25 per month)
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Igelsrud, Jon 330 The Vig Unit 308 Redondo Beach, CA 90277-2622 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 300.00	Payroll Deduction	25.00 (25 per month)
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Johnson, Craig 4245 Colony Ter Encinitas, CA 92024-4901 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 210.00	Payroll Deduction	20.00 (18 per month)
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Jones, Donald 4800 Silent Ridge Ct E Fort Worth, TX 76132-2605 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 360.00	Payroll Deduction	30.00 (30 per month)

SUBTOTAL of Receipts This Page (optional) 170.00

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Jones, Norm 13410 Preston Rd # 1-365 Dallas, TX 75240-5210 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot Aggregate Year-to-Date > $ 300.00	Payroll Deduction	25.00 (25 per month)
B. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
McClelland, Douglas 968 Heathergreen Ct Concord, CA 94521-5404 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot Aggregate Year-to-Date > $ 300.00	Payroll Deduction	25.00 (25 per month)
C. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Michaelsen, Kent 38 Sawyer Rd Hampstead, NH 03841-2130 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot Aggregate Year-to-Date > $ 240.00	Payroll Deduction	20.00 (20 per month)
D. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Morgan, Gerald 4718 Esplanade Ct Granbury, TX 76049-4010 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot Aggregate Year-to-Date > $ 240.00	Payroll Deduction	20.00 (20 per month)
E. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Ostronik, KC 101425 Overseas Hwy Ste 822 Key Largo, FL 33037-4505 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot Aggregate Year-to-Date > $ 240.00	Payroll Deduction	20.00 (20 per month)
F. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Pattan, Edward 10025 Altamont Cir Fredericksburg, VA 22408-8535 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot Aggregate Year-to-Date > $ 240.00	Payroll Deduction	20.00 (20 per month)
G. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Perry, James 12166 NW 9th Pl Coral Springs, FL 33071-5011 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot Aggregate Year-to-Date > $ 240.00	Payroll Deduction	20.00 (20 per month)

SUBTOTAL of Receipts This Page (optional) > 150.00

TOTAL This Period (last page this line number only) >

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SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allied Pilots Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Reed, Mark 2925 Coral Shores Dr Fort Lauderdale, FL 33306-1257 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 240.00	Payroll Deduction	20.00 (20 per month)
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Roach, Steve 33 Prairie Falcon Dr Novato, CA 94949-6536 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 300.00	Payroll Deduction	25.00 (25 per month)
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Roberts, Robert PO Box 57 Alpine, TX 79831-0057 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 240.00	Payroll Deduction	20.00 (20 per month)
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Schlegel, Duane 211 N Oakland St Arlington, VA 22203-3512 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 240.00	Payroll Deduction	20.00 (20 per month)
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Siciliano, Daniel 2861 NW Timbercreek Cir Boca Raton, FL 33431-4047 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 240.00	Payroll Deduction	20.00 (20 per month)
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Snelling, Thomas 747 Noble Oak Dr Marietta, GA 30066-5602 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 240.00	Payroll Deduction	20.00 (20 per month)
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Spencer, Morris 4599 Mount Gilead Church Rd Sophia, NC 27350-8635 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot $ 240.00	Payroll Deduction	20.00 (20 per month)

SUBTOTAL of Receipts This Page (optional) 145.00

TOTAL This Period (last page this line number only) .....

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SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allied Pilots Association Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Stoner, Marvin 6205 Waterview Dr Arlington, TX 76016-2049 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Occupation: Airline Pilot Aggregate Year-to-Date > $ 300.00	Payroll Deduction	25.00 (25 per month)
B. Tarpenning, Cory 31224 Eona Cir Temecula, CA 92592-5701 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Occupation: Airline Pilot Aggregate Year-to-Date > $ 300.00	Payroll Deduction	25.00 (25 per month)
C. Thielbar, Herbert 9 Segura Irvine, CA 92612-1726 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Occupation: Airline Pilot Aggregate Year-to-Date > $ 240.00	Payroll Deduction	20.00 (20 per month)
D. Thomas, Jeffrey 627 Hemlock Way Edmonds, WA 98020-4025 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Occupation: Airline Pilot Aggregate Year-to-Date > $ 300.00	Payroll Deduction	135.00 (23 per month)
E. Thomas, John 179 Harbourside Cir Jupiter, FL 33477-9349 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Occupation: Airline Pilot Aggregate Year-to-Date > $ 240.00	Payroll Deduction	20.00 (20 per month)
F. Tobin, Richard 181 E 12th St Arcata, CA 95521-6050 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Occupation: Airline Pilot Aggregate Year-to-Date > $ 240.00	Payroll Deduction	20.00 (20 per month)
G. Trommer, Scott 550 Edinburgh Cir Danville, CA 94526-2903 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Occupation: Airline Pilot Aggregate Year-to-Date > $ 250.00	Payroll Deduction	25.00 (25 per month)

SUBTOTAL of Receipts This Page (optional) 270.00

TOTAL This Period (last page this line number only) .....

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SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allied Pilots Association Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Watkins, Jeffrey 27470 W Cube Rd Barrington, IL 60010-2770 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot 300.00	Payroll Deduction	25.00 (25 per month)
B. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation / Aggregate Year-to-Date**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Weller, Gary 1887 Nickerson Way Arnold, MD 21012-2567 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	American Airlines, Inc. Airline Pilot 300.00	Payroll Deduction	25.00 (25 per month)
C. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation / Aggregate Year-to-Date**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
D. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation / Aggregate Year-to-Date**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
E. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation / Aggregate Year-to-Date**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
F. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation / Aggregate Year-to-Date**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
G. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation / Aggregate Year-to-Date**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	50.00
TOTAL This Period (last page this line number only)	1,303.00

FE4ANI01

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE OF

FOR LINE NUMBER

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) .....

NOTICE

FE7AN047

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 1/28/99
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

BC — PREPARER

2/2/99 — DATE PREPARED

(4/98)